

Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: NORTHERN MICHIGAN UNIVERSITY

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): None

Address of Service Provider: 1401 Presque Isle Avenue, Marquette, MI 49855

Name of Agent Designated to Receive
Notification of Claimed Infringement: Dr. Michael J. Roy

Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):

1401 Presque Isle
Marquette, MI 49855

Telephone Number of Designated Agent: (906) 227-2200

Facsimile Number of Designated Agent: (906) 227-¹⁵⁰⁶~~2200~~

Email Address of Designated Agent: MROY@nmu.edu

Signature of Officer or Representative of the Designating Service Provider: [Signature]
Date: 12-22-98

Typed or Printed Name and Title: Michael J. Roy
Vice President for Finance & Administration

Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee
Made Payable to the Register of Copyrights.

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RECEIVED

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